ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			1-5-02

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

BEST AVAILABLE COPY

Claim Final	Original	Date		Claim Final	Original	Date		Claim Final	Original	Date
	1				51				101	
	2				52				102	
	3				53				103	
	4				54				104	
	5				55				105	
	6				56				106	
	7				57				107	
	8				58				108	
	9				59				109	
	10				60				110	
	11				61				111	
	12				62				112	
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	16				66				116	
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	23				73				123	
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	38				88				138	
	39				89				139	
	40				90				140	
	41				91				141	
	42				92				142	
	43				93				143	
	44				94				144	
	45				95				145	
	46				96				146	
	47				97				147	
	48				98				148	
	49				99				149	
	50				100				150	

If more than 150 claims or 10 actions
staple additional sheet here

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